



September 25, 2020

House Human Services Committee

via email to Courtney DeBower, assistant committee clerk, at Courtney.DeBower_HC@house.texas.gov

Re: Interim Charge 2 - Impacts of COVID-19 on Long-Term Care Facilities

Chairman Frank,

I appreciate the opportunity to submit comments on behalf of AARP Texas on the critical issue of how to re-establish in-person visitation for all LTC (Long-Term Care) residents. Given the serious impact COVID-19 has had on residents in nursing homes and assisted living it is critical that the state address this issue in both a thoughtful and urgent way. With more than 4,000 deaths, representing 30 percent of all deaths in the state, AARP's overarching goal has been and continues to be ensuring the safety and wellbeing of our loved ones who reside in these facilities. Since March, AARP Texas has been advocating at the local, state, and federal levels on behalf of older Texans residing in long term care facilities and their families.

To that end, we have called upon the state to publicly report the names of facilities with cases among residents and staff and have urged the state to ensure all facilities have the Personal Protective Equipment (PPE) they need to keep staff and residents safe. We have also strongly advocated for the state to ensure full access to testing for both residents and staff. Because staffing shortages continue to plague many facilities, we have urged the state to take immediate action to ensure that staffing levels are adequate to meet the increased needs of residents. In addition, because remaining connected is so essential to residents' safety, health and wellbeing, we have urged the state to require facilities to make available and facilitate opportunities for virtual visitation.

Assuring that nursing facilities and other long term care facilities have met the requirements regarding testing, PPE, staffing and reporting is essential prior to facilities accepting visitors. In addition, there needs to be real accountability. If Texas is going to require nursing homes and assisted living to follow safety protocols and infection control practices before resuming visitation, there must be accountability if LTC facilities fail to meet these basic requirements.

As the state continues to re-open long term care facilities to visitors, AARP is focused on what needs to be done to protect residents going forward. We have identified the following principles with the goal of ensuring a resident-centered approach to visitation.

The following principles should guide the development of policies to reinstate visitation:

Minimizing Risk: All LTC facilities, their staff, and visitors must comply with all required infection control precautions and guidelines established by federal and state governmental entities. This includes screening of visitors (temperature and symptom checks), requiring visitors to properly use masks and other PPE, requiring the use of hand sanitizer, disinfecting visiting areas, and physical distancing.

Fairness/Universality: All LTC residents should be afforded regular opportunities for in-person visitation, in accordance with guidelines established by governmental authorities. It is not acceptable to

deny, restrict, or prioritize visitation based on a resident's cognitive status (dementia), physical limitations, or inability to verbally express feelings of loneliness or depression. Additional flexibility regarding visitation is appropriate for end-of-life and other compassionate care situations.

Individualized Plan: All residents and their families should be engaged by the facility in developing an individualized visitation plan that is reflective of their wishes and preferences, while adhering to all governmental guidelines. These plans should address visitation schedules, location of visits (indoor, outdoor, in-room, designated area, etc.) and responsibilities of all parties. These plans should be reviewed frequently and adjusted to meet changing circumstances and needs. Residents and their families may question or otherwise challenge the individualized visitation plan or any visitation restriction or determination, and they should be provided with Ombudsman assistance in doing so.

Responsibilities of LTC Facilities to Facilitate Visitation: The state should require all facilities to facilitate visits in accordance with each resident's individualized visitation plan. The state must require each facility to ensure that they have sufficient staff, PPE, and adequate and appropriate space to meet privacy needs and distancing requirements to carry out the visitation plan. It is incumbent on the facility to report to the state if they are not able to meet these requirements, and to provide an explanation for this and a plan for how it intends to address this failure. The state should require the facility to prioritize the use of [state/federal] funds for this purpose.

Notification: It is essential that there be clear, regular information from LTC facilities to residents and their loved ones about how visits will be scheduled and facilitated. The state should require that this information be shared with the state LTC Ombudsman, residents, and families on an ongoing basis in the manner best likely to inform them (email, phone, flyers on meal trays, under doors, posting in common areas, etc.).

Residents without Visitors/Outdoor Access: The state should place a high priority on ensuring that all LTC residents, whether or not they have visitors, are given the opportunity to spend time outdoors, weather permitting, and barring medical contraindications. Similarly, residents who do not have visitors should be provided the same opportunities as residents with visitors to leave their rooms for a change of environment.

On behalf of AARP Texas, we appreciate the opportunity to provide input on this important issue, and hope you find this information helpful. We are happy to discuss any of these issues and others in greater detail.

Sincerely,

A handwritten signature in cursive script that reads "Amanda Fredriksen".

Amanda Fredriksen
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